

**PALOMAR POMERADO
HEALTH**

**QUALITY
INITIATIVE
UPDATE**

Prepared for:
PPH Board of Directors
May 24, 2004



QUALITY QUIP

**"FAILURE TO PURSUE EXCELLENCE
RESULTS IN MEDIOCRE
PERFORMANCE"**

Vince Lombardi, coach of the Green Bay Packers:



CUSTOMER SERVICE

COMMUNICATION

**COST
EFFICIENCY**

**CLINICAL
OUTCOMES**



**QUALITY ACHIEVEMENTS FY
04**

- **Ranked 8/399 Hospitals** – Treatment of NSTEMI/ACS (*CRUSADE*)
- **American Heart Association – Get With The Guidelines Performance Achievement Award**
- **Top 30% of California Hospitals** – Pomerado Hospital, OB Department (*Healthgrades.com*)



QUALITY ACHIEVEMENTS FY 04 (cont.)

- **Intensivist-Driven ICU Care**
Selected for presentation at the Annual Premier BreakThroughs Conference, May 13, 2004, by Judy Davidson, RN
- **Successful POM CMS Validation Survey**
- **Successful VP and PCCC DHS Surveys**
- **Home Health Exceeding National Benchmarks**



QI MISSION

**TO BECOME THE HEALTH SYSTEM
OF CHOICE IN THE REGION BY
PROVIDING THE HIGHEST
QUALITY OF CARE**



QI VISION

**TO DEVELOP A CENTER OF
EXCELLENCE BASED ON THE
MALCOLM BALDRIGE AWARD AND
TOP 100 HOSPITALS CRITERIA**



NEW PPH VISION STATEMENT

**Palomar Pomerado Health will be the
health system of choice for patients,
physicians and employees, recognized
nationally for the highest quality of
clinical care and access to
comprehensive services.**



MALCOLM BALDRIGE AWARD

- Leadership
- Strategic Planning
- Focus on Patients, Other Customers, and Markets
- Information and Analysis
- Staff Focus
- Process Management
- Organizational Performance Results



QUALITY INITIATIVE

STRATEGIC PLAN

- ✓ Board Quality Committee Direction/Oversight
- ✓ Quality Council Coordination/Implementation
- ✓ Medical Staff Leadership Development
- ✓ Develop Excellence in the 4 C's
- ✓ Data Collection/ Statistical Analysis
- ✓ Internal and External Benchmarking



CUSTOMER SERVICE

- Customer Service Program
 - Organization-wide training program
- Measurement
 - Patient/Physician/Staff Surveys
 - Gallup Survey
- Quality of Working Life (M. Weisbord)
 - Dignity
 - Meaning
 - Community



CLINICAL OUTCOMES

DEVELOP CENTERS OF EXCELLENCE

- ✓ Performance Improvement Plan/ Patient Safety Plan
- ✓ Clinical Pathways
- ✓ Case Management
- ✓ Internal/External Benchmarking
- ✓ Leadership Development
- ✓ Effective Peer Review/ Credentialing Process
 - Department Specific Indicators
- ✓ Regulatory Compliance
 - Creation of functional teams



PERFORMANCE IMPROVEMENT

Promote a culture of performance improvement

- ✓ Patient Safety Committee
Medical Staff Co-Chair
Physician Stamps
- ✓ Medical Staff Leadership – PI projects by medical staff departments reported to BQRC
- ✓ Hospital unit PI projects reported to BQRC
- ✓ Educational sessions for leadership on the Baldrige Award, Top 100 Hospitals, US News & World Report Best Hospitals, Balanced Scorecard, Nursing Magnet Status



BEST PRACTICES

Develop and implement clinical pathways

- Congestive Heart Failure - CMRI
- AMI – Get with the Guidelines, Crusade
- Pneumonia
- CABG
- Hip and Knee Surgery
- Incorporate clinical pathways as a case management tool – Clinical Nurse Specialist (POM)
- Identify physician champions – Drs. Stein, Acheatal, Massone, Rivas, Kanter, Hirsch, Burrows, Lee, McKinley, Cloyd, Robertson, Leahy, Reichman, Samuels, Warren, Gipsman, Harrison, Bailey
- Continue collaborative relationship with Medical Directors of physician groups – promote use of Evidence Based Guidelines, address utilization issues



CASE MANAGEMENT

Re-organize Clinical Resource Management

- Focus on clinical outcomes and customer service
- Best practices as a case management tool – Patricia Chapon, Ann Lewis, Debbie Treinen
- Avoidable day tracking
- Improved denials/appeals process
- Clinical Nurse Specialist (POM) – Laura Weber



ESSENTIALS OF BENCHMARKING

Accurate data

- Accurate coding/documentation
- Concurrent chart review
- Scantron Technology, Point of Care

Database

- National – Premier Perspective Database, CMS Hospital Incentive Demonstration Project, National Hospital Voluntary Database



MEDICAL STAFF LEADERSHIP DEVELOPMENT

- **Foundation for developing a center of excellence**
 - Leadership Orientation
 - Leadership Support Manual
- **Support current Medical Staff Leadership Education**
 - Disruptive physicians
 - Physicians in Management
 - Managing Physician Performance
 - Chief of Staff Boot Camp
 - Three Faces of Quality
 - CALS Survey Preparation
 - Medical Staff Leadership Roles/Responsibilities
 - Webex Conferences – Revamping Peer Review, Whistle Blowers



MEDICAL STAFF LEADERSHIP DEVELOPMENT

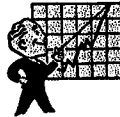
Expansion of Medical Staff Leadership Roles in Quality

- ✓ Dr. Cynthia Robertson – Co-Chair, Patient Safety Committee
- ✓ Dr. Duane Buringrud – Co-Chair, Quality Council



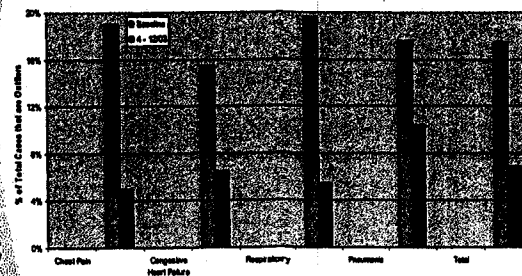
COST-EFFICIENCY

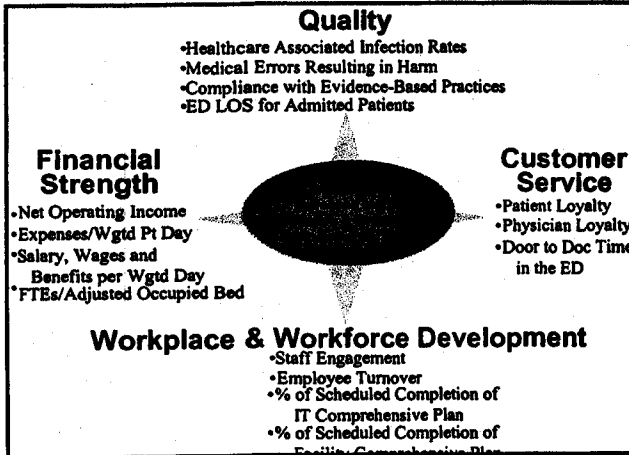
- ✓ Utilization Management – Established database to track avoidable days and denials
- ✓ Clinical Pathways
- ✓ Case Management
- ✓ Outlier LOS Management



OUTLIER LOS MANAGEMENT


Percent of Outliers
Fiscal Year 2005 vs. April - December 05






SUMMARY

- ✓ Increased physician involvement in QI
- ✓ Increased staff involvement in QI
- ✓ Increased multidisciplinary collaboration
- ✓ Increased collaboration between MEC leadership at PMC and POM
- ✓ Medical staff leadership requests for specific educational opportunities




QUALITY QUIPS

- Everyone in the organization is responsible for quality
- Quality is defined by excellence in customer service, clinical outcomes, and cost-efficiency
- The goal is to become the provider of choice through the development of a center of excellence
- Improvement = Measurement + Analysis



"I love it when a (strategic) plan comes together"



*Hannibal (George Peppard)
TV Series - The A-TEAM*

